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Application Number	10/812609
Filing Date	03/30/2004
First Named Inventor	Faul Re et al
Title	APPARATUS AND METHOD FOR THE REPAIR OF ARTICULAR CARTILAGE DEFECTS
Art Unit	3734
Examiner Name	Lindsay Bachman
Attorney Docket Number	H-US-01403CON

I hereby revoke all previous powers of attorney given in the above-identified application.

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OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on

SIGNATURE OF Applicant or Assignee of Record

Signature	Date
Name Mark Farber	2/23/2008
Title and Company Assistant Secretary	203-492-5000

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.☐ Total of forms are submitted.

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